

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A Business Logic Server For Facilitating The Transmission Of A Data Download To A Mobile Wireless Unit

the specification of which is attached hereto unless the following space is checked:

☐ was filed on _____ as United States Application Serial Number _____.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s):

	<u>Number</u>	<u>Country</u>	<u>Day/Month/Year Filed</u>
1.			
2.			

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below:

	<u>Application Number</u>	<u>Filing Date</u>
1.		
2.		

I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT international application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

	<u>Application Number</u>	<u>Filing Date</u>	<u>Status: patented, pending, abandoned</u>
1.			

2.

I hereby appoint the practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and I direct that all correspondence be addressed to that Customer Number.

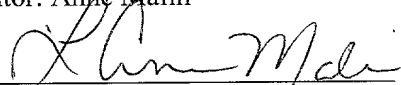
Customer Number: **028005**

Principal attorney or agent: Steven J. Funk

Telephone number: 913-624-6828

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of first inventor: Anne Malin

Inventor's signature: 

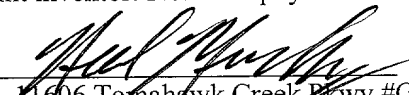
Date: 4/16/01

Residence: 7318 Oakview Street, Shawnee KS, 66216

Citizenship: United States

Post Office Address: 7318 Oakview Street, Shawnee KS, 66216

Full name of second joint inventor: Neal Murphy

Inventor's signature: 

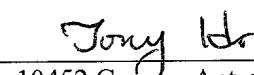
Date: 4/16/01

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Full name of third joint inventor: Tony Ho

Inventor's signature: 

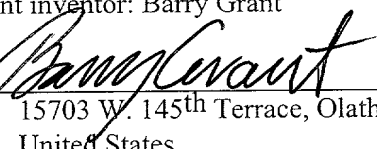
Date: 4/16/01

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Full name of fourth joint inventor: Barry Grant

Inventor's signature: 

Date: 4/16/01

Residence: 15703 W. 145th Terrace, Olathe, KS 66062

Citizenship: United States

Post Office Address: 15703 W. 145th Terrace, Olathe, KS 66062

Variable	Mean	Standard deviation	Minimum	Maximum
Age	34.5	10.2	22	55
Gender	0.5	0.5	0	1
Marital status	0.6	0.5	0	1
Education	12.5	1.5	10	15
Income	1500	500	1000	2500
Health status	0.8	0.2	0	1
Employment status	0.7	0.5	0	1
Home ownership	0.6	0.5	0	1
Vehicle ownership	0.4	0.5	0	1
Life satisfaction	4.5	1.5	1	7
Subjective health	5.0	1.0	1	7
Life expectancy	75.0	5.0	60	90
Quality of life	6.0	1.0	1	7
Healthcare utilization	2.0	1.0	0	3
Health insurance	0.9	0.3	0	1
Healthcare access	0.8	0.2	0	1
Healthcare cost	1000	500	500	2000
Healthcare quality	4.0	1.0	1	7
Healthcare satisfaction	5.0	1.0	1	7
Healthcare accessibility	0.7	0.5	0	1
Healthcare affordability	0.6	0.5	0	1
Healthcare availability	0.8	0.2	0	1
Healthcare effectiveness	0.9	0.1	0	1
Healthcare efficiency	0.7	0.3	0	1
Healthcare equity	0.6	0.4	0	1
Healthcare safety	0.9	0.1	0	1
Healthcare security	0.8	0.2	0	1
Healthcare transparency	0.7	0.3	0	1
Healthcare accountability	0.6	0.4	0	1
Healthcare responsiveness	0.8	0.2	0	1
Healthcare patient-centeredness	0.9	0.1	0	1
Healthcare evidence-based practice	0.7	0.3	0	1
Healthcare continuous improvement	0.6	0.4	0	1
Healthcare innovation	0.5	0.5	0	1
Healthcare leadership	0.4	0.6	0	1
Healthcare governance	0.3	0.7	0	1
Healthcare management	0.2	0.8	0	1
Healthcare strategy	0.1	0.9	0	1
Healthcare vision	0.0	1.0	0	1
Healthcare mission	0.0	1.0	0	1
Healthcare values	0.0	1.0	0	1
Healthcare culture	0.0	1.0	0	1
Healthcare climate	0.0	1.0	0	1
Healthcare environment	0.0	1.0	0	1
Healthcare system	0.0	1.0	0	1
Healthcare organization	0.0	1.0	0	1
Healthcare structure	0.0	1.0	0	1
Healthcare process	0.0	1.0	0	1
Healthcare outcome	0.0	1.0	0	1
Healthcare impact	0.0	1.0	0	1
Healthcare legacy	0.0	1.0	0	1
Healthcare reputation	0.0	1.0	0	1
Healthcare brand	0.0	1.0	0	1
Healthcare identity	0.0	1.0	0	1
Healthcare image	0.0	1.0	0	1
Healthcare perception	0.0	1.0	0	1
Healthcare attitude	0.0	1.0	0	1
Healthcare belief	0.0	1.0	0	1
Healthcare opinion	0.0	1.0	0	1
Healthcare judgment	0.0	1.0	0	1
Healthcare decision	0.0	1.0	0	1
Healthcare action	0.0	1.0	0	1
Healthcare behavior	0.0	1.0	0	1
Healthcare habit	0.0	1.0	0	1
Healthcare routine	0.0	1.0	0	1
Healthcare pattern	0.0	1.0	0	1
Healthcare trend	0.0	1.0	0	1
Healthcare movement	0.0	1.0	0	1
Healthcare change	0.0	1.0	0	1
Healthcare development	0.0	1.0	0	1
Healthcare progress	0.0	1.0	0	1
Healthcare achievement	0.0	1.0	0	1
Healthcare success	0.0	1.0	0	1
Healthcare fulfillment	0.0	1.0	0	1
Healthcare realization	0.0	1.0	0	1
Healthcare attainment	0.0	1.0	0	1
Healthcare completion	0.0	1.0	0	1
Healthcare accomplishment	0.0	1.0	0	1
Healthcare realization	0.0	1.0	0	1
Healthcare achievement	0.0	1.0	0	1
Healthcare success	0.0	1.0	0	1
Healthcare fulfillment	0.0	1.0	0	1
Healthcare realization	0.0	1.0	0	1
Healthcare attainment	0.0	1.0	0	

Date: _____

Post Office Address:

Inventor's signature: Robert Howe

Date: April 16, 2001

Post Office Address: 8421 W. 131st Place, Apt 722, Overland Park, KS 66213-5119

Inventor's signature: Jonathan V.

Date: 4/16/01

Post Office Address: 8401 W. 108th Street, Apt F, Overland Park, KS 66210

Full name of fifth joint inventor: Carl L. Finlayson

Full name of individual: Carl L. Furleyson I
Inventor's signature: Carl L. Furleyson
Residence: 2502 Wade Street, Piscataway, NJ 08854
Citizenship: United States
Post Office Address: 2502 Wade Street, Piscataway, NJ 08854

Date: Apr 9 200

Full name of sixth joint inventor: Jasper Howe

Inventor's signature: _____ Date: _____
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Full name of seventh joint inventor: Srivatsan Varadharajan

Inventor's signature: _____ Date: _____
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